ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| FEE DETERMINATION | J | | 05/(5/0) |
| O.I.P.E. CLASSIFIER | | 59 | 6/5/ |
| FORMALITY REVIEW | S.A | 1082 | 07/09/01 |
| RESPONSE FORMALITY REVIEW | | | |
| | | | |

## INDEX OF CLAIMS

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= ................................. Allowed   I ................................. Interference
— (Through numeral)... Canceled  A ................................. Appeal
÷ ................................. Restricted  O ................................. Objected

| Claim Final | Original | Date |  | Claim Final | Original | Date |  | Claim Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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